

Job cuts mount in German clinics and nursing homes despite the pandemic

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In many parts of Germany, nursing staff have been working at their limits for over a year now. But now, in the middle of the country's third wave of the pandemic, doctors, nurses and caregivers are faced with a new threat: clinics are laying off personnel to boost profits. This is a slap in the face of caregivers and nursing staff, for whom this will mean increased workload and even greater stress.

For days now there has been a steady stream of news in the German media about planned layoffs and clinic closures.

In Bremen, the municipal clinic association "Gesundheit Nord" (Geno) is in the process of cutting 440 full-time positions. In order to get "in the black," the Bremen senate coalition of Social Democrats, Left Party and Greens wants to cut more than one in five jobs in the clinic association by 2024.

Bremen's health senator Claudia Bernhard (Left Party) is also chairwoman of Geno's supervisory board. She has defended the decision and glossed over the job cuts by claiming that nursing staff are not affected by layoffs. In reality, among those laid off are many nurses currently on temporary and contract work, nurses in their probation period as well as nursing assistants.

In Cologne, the municipal hospitals are to be merged with the university hospital forming a "Charité of the West" in order to save 40 million euro. Several hundred jobs will be eliminated through "synergy effects." Here, too, it can be assumed that the service sector union Verdi, which claims to be "against compulsory redundancies," will support the reduction of non-permanent employees, just like the Left Party does in Bremen.

In the city of Bernkastel-Kues on the Moselle river, the Median Group is in the process of closing one of four rehabilitation clinics, initially for two months. Together, the four clinics' 630 employees care for more than 800 patients. In the last eight years, Median has already cut one in ten jobs in the Kueser Plateau region and closed one of its original five clinics.

For weeks, nursing staff in Bernkastel-Kues have been fighting this exploitation and the reduction in wages. Every

Thursday they march through the parks with banners and posters pointing out that they have not received a pay raise in seven years. Not even a promised one-time special pandemic payment of 1500 euro has been disbursed by the Median Group. Many nursing staff now assume that the closure of the rehabilitation clinic is a deliberate lockout and an act of intimidation to forestall a strike in May.

In Ingelheim on the Rhine, a specialized COVID-19 clinic was closed in December, even though it remains sorely needed during the pandemic. But economic consultants at the Bertelsmann Foundation deemed Ingelheim expensive and inefficient. The closure liquidates 190 jobs.

In Göppingen in the state of Baden-Württemberg, nursing staff are currently demonstrating against the planned closure of the Helfenstein Clinic. There, 135 jobs are threatened in the medical and nursing fields alone.

Last year, despite the coronavirus pandemic, numerous hospitals were closed. In the state of Saarland, the Marienhausklinik Ottweiler was shuttered. In Bavaria, both the Schön-Klinik in Fürth as well as two hospitals of the Kliniken Nordoberpfalz AG (Waldsassen and Vohenstrauß) were closed. In the state of North Rhine-Westphalia, two hospitals in the city of Essen were closed including Marienhospital Altenessen and St. Vinzenz in Essen-Stoppenberg.

In the state of Rhineland-Palatinate, in addition to the Ingelheim Clinic, the two Loreley Clinics in St. Goar and Oberwesel were closed, just like the Diakonissen Hospital in Lehnin in the state of Brandenburg. Numerous further closures are also expected to follow this year. One example is the hospital in the Dresden city district of Neustadt/Trachau, 97 percent of which will be shuttered.

In almost every case, furious residents have protested the closures, which are always justified by "economic reasons." Each time, dozens if not hundreds more caregivers are thrown out of their jobs. The program "plusminus" of the German broadcaster ARD said of the wave of clinic closures: "In the shadow of Corona, the dismantling is being driven forward." It went on to explain, "November's second

hospital bailout is only for clinics with emergency levels 2 and 3 - which are almost exclusively the 400 or so large maximum care providers. The smaller ones will come away empty-handed.”

Primarily the large, private health care groups, such as Fresenius-Helios will survive the crisis. One of the world’s largest hospital groups, Fresenius-Helios is a screaming example of how private hospital chains are enriching themselves during the pandemic at the expense of nursing staff and patients.

In pandemic year 2020, the Fresenius-Helios Group in Germany made a profit of 602 million euro. The company had “weathered the Corona pandemic well,” explained CEO Stephan Sturm at the annual press conference in February 2021, as reported by the ARD magazine *FAKT* on April 13 in a feature on the Herzzentrum (Heart Centre) Leipzig, which belongs to Fresenius.

Herzzentrum Leipzig generated a net profit of 23 million euro in 2020, an increase of seven million euro or 43 percent compared to the previous year. Despite this, Fresenius is exerting even more pressure on nursing staff in the interests of its shareholders. Profits are expected to grow by a further five to nine percent per year until 2023. To this end, an additional ten percent of physician positions are to be cut and temporary contracts are to be phased out.

FAKT quotes anonymous doctors, who already provide 140 percent of the normal service, as saying: “Many of us already can’t do any more.” And, “We are seen as part of a machine, and the patients as a product. That’s what we’re fighting back against.”

According to the financial paper *Handelsblatt*, Fresenius is one of the few German companies to belong to the “illustrious circle of dividend aristocrats.” The company’s dividend has climbed steadily for 28 continuous years. The *Handelsblatt* writes: “The health care group Fresenius has increased its dividend by an average of almost 25 percent over the past ten years. At first glance, the yield of one percent is modest. But the reason for this is a pleasing one: The share price rose rapidly over the same period—from 10 euro to over 90 euro.”

This “pleasing return” is literally being generated from the bones of the nursing staff.

The job cuts are not only affecting hospitals: increasingly the red pen is being applied to senior citizens’ and nursing homes, too. There are several current examples of this from Switzerland. The Swiss newspaper *20 Minuten* reported succinctly on the wave of layoffs in nursing homes: “The strain on nursing facilities during the first wave was great. Nursing staff suffered as a result. Now it is going to the other extreme. There is under-occupancy in the homes.” As an example, the report points to layoffs at the Uzwil (St.

Gallen) senior centre.

Another example is a retirement home run by the Amalie-Widmer Foundation in Horgen, which has just laid off 45 nursing staff, almost one in six. Sixty percent of nursing homes in Switzerland are complaining of under-occupancy as a result of the pandemic. Quite a few will respond by slashing jobs, an example that Germany will increasingly follow. It is the height of cynicism that nursing positions in homes and hospitals are being cut as a result of the impact of the pandemic last fall and winter.

Even before the pandemic, nurses repeatedly protested staffing shortages, but went unheard. Then two waves of pandemic increased the work pressure unspeakably. Many nursing staff were infected with COVID-19 at work.

According to a study by the insurance provider AOK, geriatric care and health care are the two occupational groups most affected by COVID-19. The current twelve-month balance sheet shows that for every 100,000 care workers insured with AOK, 5409 in geriatric care and 5338 in nursing were on sick leave due to a coronavirus infection. This means that more than one in twenty caregivers has experienced moderate to severe COVID-19.

The Robert Koch Institute (RKI) reports that in Germany nearly 82,000 health care workers and nearly 62,000 nursing home workers have contracted COVID-19. About three percent of them had to be hospitalized. The real numbers are far higher. As the RKI itself acknowledges, “it should be taken into account that this information is only available for a subset of COVID-19 cases.”

Many caregivers have paid for their efforts with their lives. The RKI lists 81 cases of staff who died of COVID-19 after working in hospitals, rehabilitation facilities, doctors’ offices, dialysis facilities, or emergency medical services. For employees in nursing facilities, the figure rises to 168 deaths. This means that, according to officially known figures, nearly 250 caregivers in hospitals or nursing homes have died after being infected with the virus. Globally, an average of one health care worker has died from COVID-19 every 30 minutes, according to Amnesty International.

At the same time, tens of thousands of nursing home residents and patients have also died a sad coronavirus death, which many pension funds, one must assume, were none too sad about. And now, the bottom line is that caregivers are being made to pay once again for the pandemic in the form of layoffs and ever greater work stress.



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